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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 32851PCTUSAA; 070338.0556	
		In re Application of Daniel et al.	
		Application Number 09/462,387	Filed April 19, 2000
		For SILICA-CONTAINING RUBBER	* see attached
		Group Art Unit 1714	Examiner C. Shosho
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, <u>March 14, 2002</u>, rejecting the following claims: <u>13 and 15-27</u></p> <hr/> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) <u>\$ 320</u></p> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <u>\$</u> _____     </p> <p> <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.     </p> <p> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.     </p> <p> <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.     </p> <p> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-4377</u>. I have enclosed a duplicate copy of this sheet.     </p> <p> <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.     </p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>I am the</p> <p> <input type="checkbox"/> applicant/inventor.     </p> <p> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)     </p> <p> <input checked="" type="checkbox"/> attorney or agent of record. PTO Reg No.32,300     </p> <p> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____     </p> <p><i>Rochelle K. Seide</i> Signature</p> <p>Rochelle K. Seide, Ph.D. Typed or printed name</p> <p>September 12, 2002 Date</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p>			

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